**MISSING PERSON INCIDENT**

**MAJOR INCIDENT REPORTING FORM**

**DUTY OFFICER INFORMATION:**

1. INCIDENT NAME:
2. PREPARED BY:       PHONE:       DATE:       TIME:
3. STATUS:
4. LOCATION AND DESCRIPTION
	1. NATURE OF INCIDENT:
	2. INCIDENT LOCATION:
	3. INCIDENT CITY:
	4. REPORTING AGENCY/NAME:
5. CURRENT ORGANIZATION
	1. INCIDENT COMMANDER:
	2. COMMAND AGENCY:
	3. CONTACT PHONE:
6. RESOURCES SUMMARY
	1. LOCAL RESPONDERS:
	2. STATE:
	3. FEDERAL:
	4. VOLUNTEER/PRIVATE:
7. INCIDENT SUMMARY
	1. GENERAL
		1. DEATHS:
		2. INJURIES:
	2. DAMAGES:
	3. SUMMARY:
8. DUTY OFFICER CALLED (605-773-3231)/emailed (sdoemdutyofficer@state.sd.us):
9. REGION 6 COORDINATOR CALLED (605-770-9540)/emailed (dave.beintema@state.sd.us):

**NON-DUTY OFFICER INFORMATION:**

CURRENT WEATHER CONDITIONS AT SCENE:

WIND SPEED:       DIRECTION:       TEMPERATURE:      ° CLIMATE:

AGENCIES ON SCENE:

S.A.R. MEMBERS DEPLOYED:

S.A.R. MEMBERS CALLED IN BUT NOT DEPLOYED:

OEM/S.A.R. MEMBERS DEPLOYMENT EXCUSED:

S.A.R. MEMBERS UNACCOUNTED FOR:

S.A.R. EQUIPMENT DEPLOYED: